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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

JUN 20 2017

JEFFREY P. ALLSTEADT, CLERK INTAKE 3

> ☐ Check if this is an amended filing

Fill in this information to identify your case: United States Bankruptcy Court for the: Northern District of Illinois Case number (If known): Chapter you are filing under: ☐-effaoter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1. Identify Yourself		·*
1.	Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name Middle name Last name Suffix (Sr., Jr., II, III)	First name Middle name Last name Suffix (Sr., Jr., II, III)
el no casso			OUTIX (Of., Jr., II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security	xxxx - xx - <u>32 2 7 2</u>	TO COLOR TO CONTRACT OF THE COLOR OF T
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9 xx - xx	9 xx - xx

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Debtor 1 Tirst Name Middle N	JONES C	Case number (if known)
a baser-untaran shinesinesis kashisi kakalisi yakuwande erener naces keprunjara isaki waneneninsi kan ciala wase	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	I have not used any business names or EINs.	☐ I have not used any business names or EfNs.
the last 8 years	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
. Where you live		If Debtor 2 lives at a different address:
	Number Street Laramile	Number Street
	Chicago TL 60651	City State ZIP Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any
	other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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De	ebtor 1 First Name Middle	lame	Last Name	S		Case number (#	known)	
े ?	art 2: Tell the Court Abo	out Your I	3ankruptcy -	Case				
7.	The chapter of the Bankruptcy Code you are choosing to file	Check of for Band	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	under		pter /					
			pter 12					
			pter 13					
							Same and the second of the sec	
8.	How you will pay the fee	loca you sub with	al court for mo rself, you ma mitting your p a pre-printed	ore details abou y pay with cash payment on you d address.	ut how you n n, cashier's c ur behalf, you	nay pay. Typical sheck, or money ur attorney may	eck with the clerk's office in your lly, if you are paying the fee order. If your attorney is pay with a credit card or check	
		☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).						
***********		By l less pay	aw, a judge n than 150% o the fee in ins	nay, but is not r of the official po stallments). If yo	required to, voverty line that ou choose th	waive your fee, a at applies to you is option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the with your petition.	
9.	Have you filed for bankruptcy within the	□ ₩₀						
	last 8 years?	₩ Yes.	District		When	MM / DD / YYYY	Case number	
			District		When	MM / DD / YYYY	Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	1 No	The state of the s			***************************************		
	filed by a spouse who is	Yes.	Debtor				Relationship to you	
	not filing this case with you, or by a business partner, or by an affiliate?		District	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	When	MM/DD/YYYY	Case number, if known	
	,		Debtor				Relationship to you	
							Case number, if known	
1.	Do you rent your residence?	No. Yes.	Go to line 12. Has your land residence?		eviction judgi	ment against you	and do you want to stay in your	
					ent About an E	Eviction Judgment	Against You (Form 101A) and file it with	

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Dei	otor 1 THAME Middle Nam	ne	Jone S Last Name		Case	number (if known)			4-W-Marin
Pa	rt 3: Report About Any I	Business	es You Own as a So	le Propriet	or				
12.	Are you a sole proprietor of any full- or part-time business?	-	مم Go to Part 4. Name and location of bu	usiness					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as		Name of business, if any						
	a corporation, partnership, or LLC.		Number Street	······································					
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		City			State	ZIP Code		
			Check the appropriate b	ox to describe	your busines:	s:			
			Health Care Busines	ss (as defined	in 11 U.S.C. §	101(27A))			
			☐ Single Asset Real E	state (as defir	ed in 11 U.S.C	. § 101(51B))			
			☐ Stockbroker (as defi	ned in 11 U.S	.C. § 101(53A))			
			Commodity Broker (as defined in	11 U.S.C. § 10	1(6))			
			None of the above						
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	most reany of the	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11.						
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).		I am filing under Chapte the Bankruptcy Code.	•	NOT a small b	usiness debto	or according to	the definition in	
		☐ Yes.	I am filing under Chapte Bankruptcy Code.	r 11 and I am	a small busine	ss debtor acc	ording to the c	lefinition in the	
Pa	rt 4: Report if You Own	or Have	Any Hazardous Prop	erty or Any	Property Ti	nat Needs I	mmediate A	Attention	
14.	Do you own or have any	-12 No	_						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?						
	public health or safety? Or do you own any property that needs		If immediate attention i	is needed wh	v is it needed?				
	immediate attention? For example, do you own				,				Mari
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?								
			Where is the property?	Number	Street				
						- 1/ 			_
				City			State	ZIP Code	

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Debtor 1 First Name Middle Name Last Name

Case number (if known)____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	about
credit counseling because of:	

Disability.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 First Name Middle N	Last Name	Case number (if known)			
Part 6: Answer These Que	estions for Reporting Purpo	ses				
16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.					
	 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obta money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 					
17. Are you filing under Chapter 7?	☐ No. I am not filing under Cl	hapter 7. Go to line 18.	The second secon			
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapt administrative expense	ler 7. Do you estimate that after any ex es are paid that funds will be available	empt property is excluded and to distribute to unsecured creditors?			
How many creditors do you estimate that you owe?	1-49 50-99 100-199 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000			
9. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion			
or you	I have examined this petition, an	id I declare under penalty of perjury tha	at the information provided is true and			
•	correct. If I have chosen to file under Cha of title 11, United States Code. I under Chapter 7.	apter 7, I am aware that I may proceed understand the relief available under e	, if eligible, under Chapter 7, 11,12, or 13 ach chapter, and I choose to proceed			
	triis document, i nave obtained a	ma read the notice required by 11 U.S.				
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both					
	18 U.S.C. §§ 152, 1341, 1519, at Signature of Debter 1) ×	40-11-0			
	Executed on MM DD	Signatur Signatur Execute	re of Debtor 2 rd on			

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For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this p to proceed under Chapter 7, 11, 12, or 13 of tit available under each chapter for which the per the paties required by 111 LSC \$ 242(b) and	le 11, United States Code, a son is eligible. I also certify t	nd have explained the relief		
If you are not represented by an attorney, you do not need to file this page.	the notice required by 11 U.S.C. § 342(b) and, in a case in which knowledge after an inquiry that the information in the schedules		nicn § 707(b)(4)(U) applies, certify that I have no es filed with the petition is incorrect.		
	Signature of Attorney for Debtor	Date	MM / DD /YYYY		
	Printed name				
	Firm name				
	Number Street				
	City	State	ZIP Code		
	Contact phone	Email address			
	Bar number	State	•		

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To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay. You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy or must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or property case is discharged of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying, include bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned. If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy of the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply. Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? No Yes Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy form yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). By signiture of petics? Signature of Debtor 2 Da	For you if you are filing this bankruptcy without an attorney	The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.	
court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list property or property claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your benkruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned. If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply. Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? No Pres Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? No Pres Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy form the pay of the		technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or firm if your case is selected for audit. If that happens, you could lose your right to file anothe	g or audit
hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply. Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? No No Yes Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy form Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.		court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete	debt : e can y
Consequences? No Pres Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? No Pres Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy form No Pres. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). By signing here, I acknowledge that I understand the risks involved in filling without an attorney. I have read and understood this notice, and I am aware that filling a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case. Signature of Debtor 2 Date Date		hired an attorney. The court will not treat you differently because you are filing for yourself. T successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must a	o be
Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy form No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case. Signature of Debtor 2 Date Date		consequences?	
inaccurate or incomplete, you could be fined or imprisoned? No Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy form No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). By signing here, I acknowledge that I understand the risks involved in filling without an attorney. I have read and understood this notice, and I am aware that filling a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case. Signature of Debtor 2 Date Date			
Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy form No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). By signing here, I acknowledge that I understand the risks involved in filling without an attorney. I have read and understood this notice, and I am aware that filling a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case. Signature of Debtor 2 Date Date		inaccurate or incomplete, you could be fined or imprisoned?	
By signing here, I acknowledge that I understand the risks involved in filling without an attorney. I have read and understood this notice, and I am aware that filling a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case. Signature of Debtor 2 Date Date		☐ Yes. Name of Person	
Date 014 2017 Date		By signing here, I acknowledge that I understand the risks involved in filing without an attorne have read and understood this notice, and I am aware that filing a bankruptcy case without ar attorney may cause me to lose my rights or property if I do not properly handle the case.	ev. 1
L. J		0/0/10/2017	

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The fire this information to identify your case:	
Debtor 1 Test Name Middle Name Last Name	
Debtor 2	
United States Bankruptcy Court for the: WHY District of	
Case number	☐ Check if this is an
(If known)	amended filing
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistical In	formation 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible information. Fill out all of your schedules first; then complete the information on this form. If you are filing amer your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	for supplying correct nded schedules after you file
Part 11 Summarize Your Assets	
	Your assets
4. Cabadula A/D. Daniel (O/E : LE 4004/D)	Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	s
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>()</u>
1c. Copy line 63, Total of all property on Schedule A/B	
	3
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$

 Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F 	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	
, , , , , , , , , , , , , , , , , , , ,	* \$
Your total liabiliti	es \$
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$
5. Schedule J: Your Expenses (Official Form 106J) Conveyour monthly expenses from line 22c of Schedule J.	
t programme magnitude (NYBOROOO teore line 1276 of Cohodude I	

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Debtor	1 First Name Middle Name	Last Name	Ca	ase number (# known)	
Part	4: Answer These Questions	for Administrative and Stat	istical Records		
6. A ı	e you filing for bankruptcy under C	hapters 7, 11, or 13?			
	No. You have nothing to report on the	is part of the form. Check this bo	x and submit this fo	orm to the court with your othe	er schedules.
7. Wi	at kind of debt do you have?		* *** * * * * * * * * * * * * * * * * *	······································	The state of the second
Ø	Your debts are primarily consume family, or household purpose." 11 U.	e r debts. Consumer debts are tho S.C. § 101(8). Fill out lines 8-9g t	ose "incurred by an for statistical purpo	individual primarily for a pers ses. 28 U.S.C. § 159.	onal,
	Your debts are not primarily const this form to the court with your other	umer debts. You have nothing to schedules.	report on this part	t of the form. Check this box a	nd submit
8. Fro	om the <i>Statement of Your Current N</i> rm 122A-1 Line 11; OR , Form 122B Li	fonthly Income: Copy your total ine 11; OR, Form 122C-1 Line 14	current monthly inc	come from Official	\$
	oy the following special categories rom Part 4 on <i>Schedule E/F</i> , copy tl		Schedule E/F:	Total claim	memende de fermine en e
9a.	Domestic support obligations (Copy li	ine 6a.)		\$	
9b.	Taxes and certain other debts you ow	ve the government. (Copy line 6b	.)	\$	
9c.	Claims for death or personal injury wh	nile you were intoxicated. (Copy li	ine 6c.)	\$	
9d.	Student loans. (Copy line 6f.)			\$	
9e.	Obligations arising out of a separatior priority claims. (Copy line 6g.)	n agreement or divorce that you o	lid not report as	\$	
9f.	Debts to pension or profit-sharing plan	ns, and other similar debts. (Cop	y line 6h.)	+ \$	
9g.	Total. Add lines 9a through 9f.			\$	

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Debtor 1 Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: Case number	Middle Name Middle Name	Last Name Last Name	[☐ Check if this is an
		7-04 (10 Mar 10		amended filing
Official Form 106A/B	_			
Schedule A/B: I	Propert	У		12/15
responsible for supplying correct is write your name and case number Part 1: Describe Each Reside	st. Be as comple information. If mo (if known). Answ ence, Building,	s. List an asset only once. If an asset fits in more te and accurate as possible. If two married peoplers space is needed, attach a separate sheet to the er every question. Land, or Other Real Estate You Own or Harst in any residence, building, land, or similar prop	e are filing together, be als form. On the top of a ve an Interest In	oth are equally
Yes. Where is the property?				
1.1Street address, if available, or or	ther description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured of the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ms Secured by Property. Current value of the
		Land	entire property?	portion you own?
City S	tate ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
***************************************		Who has an interest in the property? Check one. Debtor 1 only		
County		☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this it property identification number:	(see instructions) em, such as local	mmunity property
If you own or have more than one,	list here:	property identification number.		
1.2. Street address, if available, or of	her description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
		Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		☐ Land ☐ Investment property	\$	\$
City St	ate ZIP Code	Timeshare Other	Describe the nature of interest (such as feet the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one. Debtor 1 only		
County		Debtor 2 only		
,		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
		Other information you wish to add about this iter property identification number:	n, such as local	

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Debtor '	First Name Middle Name	ast Name	Case number (a	f known)	
1.3.	Street address, if available, or other descrip	tion	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured of the amount of any secure Creditors Who Have Clai Current value of the	ed claims on Schedule D ms Secured by Property
			Condominium or cooperative Manufactured or mobile home	entire property?	portion you own?
			☐ Land	\$	\$
	City State ZIF	Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
	County	And Agentuge surgery	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is co	
			Other information you wish to add about this it property identification number:	em, such as local	
you l	nave attached for Part 1. Write that nu	mber he	ere.	·····	3
art 2: o you e	Describe Your Vehicles	interest vehicle,	in any vehicles, whether they are registered or also report it on Schedule G: Executory Contracts	not? Include any vehicles	
art 2: o you e	Describe Your Vehicles own, lease, or have legal or equitable that someone else drives. If you lease a vans, trucks, tractors, sport utility veno	interest vehicle,	in any vehicles, whether they are registered or also report it on Schedule G: Executory Contracts	not? Include any vehicles	
art 2: o you o ou own Cars,	Describe Your Vehicles own, lease, or have legal or equitable that someone else drives. If you lease a vans, trucks, tractors, sport utility veno	interest vehicle, hicles, I	in any vehicles, whether they are registered or also report it on Schedule G: Executory Contracts motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	not? Include any vehicles and Unexpired Leases. Do not deduct secured clathe amount of any secured Creditors Who Have Clain	nims or exemptions. Put it claims on Schedule D: ns Secured by Property.
o you ou own Cars,	Describe Your Vehicles own, lease, or have legal or equitable that someone else drives. If you lease a vans, trucks, tractors, sport utility veo es Make:	interest vehicle, hicles, r	in any vehicles, whether they are registered or, also report it on Schedule G: Executory Contracts motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	not? Include any vehicles and Unexpired Leases. Do not deduct secured clathe amount of any securer	ims or exemptions, Put
o you ou own Cars,	Describe Your Vehicles own, lease, or have legal or equitable that someone else drives. If you lease a vans, trucks, tractors, sport utility veo es Make: Model:	interest vehicle, hicles, r	in any vehicles, whether they are registered or also report it on Schedule G: Executory Contracts motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	not? Include any vehicles and Unexpired Leases. Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the	ims or exemptions. Put d claims on Schedule D: as Secured by Property. Current value of the
o you ou own Cars,	Describe Your Vehicles own, lease, or have legal or equitable that someone else drives. If you lease a vans, trucks, tractors, sport utility veo oes Make: Model: Year: Approximate mileage:	interest vehicle, hicles, r	in any vehicles, whether they are registered or, also report it on Schedule G: Executory Contracts motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	not? Include any vehicles and Unexpired Leases. Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the	ims or exemptions. Put d claims on Schedule D: as Secured by Property. Current value of the
o you oun Cars,	Describe Your Vehicles own, lease, or have legal or equitable that someone else drives. If you lease a vans, trucks, tractors, sport utility veo oes Make: Model: Year: Approximate mileage:	interest vehicle, hicles, r	in any vehicles, whether they are registered or also report it on Schedule G: Executory Contracts motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	not? Include any vehicles and Unexpired Leases. Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the entire property?	ims or exemptions. Put a claims on Schedule Das Secured by Property. Current value of the portion you own?
o you oun Cars, Y 3.1.	Describe Your Vehicles own, lease, or have legal or equitable that someone else drives. If you lease a vans, trucks, tractors, sport utility veo oes Make: Model: Year: Approximate mileage: Other information:	interest vehicle, hicles, I	in any vehicles, whether they are registered or also report it on Schedule G: Executory Contracts motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	not? Include any vehicles and Unexpired Leases. Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the entire property?	ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own?
art 2: O you on Cars, Y 3.1.	Describe Your Vehicles own, lease, or have legal or equitable that someone else drives. If you lease a vans, trucks, tractors, sport utility veo oes Make: Model: Year: Approximate mileage: Other information:	interest vehicle, hicles, i	in any vehicles, whether they are registered or also report it on Schedule G: Executory Contracts motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	not? Include any vehicles and Unexpired Leases. Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the entire property? \$	ims or exemptions. Put a claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
art 2: O you on Cars, Y 3.1.	Describe Your Vehicles own, lease, or have legal or equitable that someone else drives. If you lease a vans, trucks, tractors, sport utility veo es Make: Model: Year: Approximate mileage: Other information: own or have more than one, describe he make:	interest vehicle, hicles, r	in any vehicles, whether they are registered or also report it on Schedule G: Executory Contracts motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	not? Include any vehicles and Unexpired Leases. Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim	ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own? \$

Approximate mileage: _

Other information:

instructions)

lacksquare At least one of the debtors and another

 $oxed{\Box}$ Check if this is community property (see

portion you own?

entire property?

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Document Page 13 of 58 Debtor 1 Case number (if known) Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property, Debtor 2 only Year: Current value of the
Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the
Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No ☐ Yes Who has an interest in the property? Check one. 4,1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Modei; Creditors Who Have Claims Secured by Property.

Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

Debtor 2 only

instructions)

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this is community property (see

Year:

Other information:

Current value of the

portion you own?

Current value of the

entire property?

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Debtor 1

Case number (if known)	
------------------------	--

Do you own or have any	legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods an Examples: Major appli	d furnishings ances, furniture, linens, china, kitchenware	
☐ Yes. Describe		\$
7. Electronics Examples: Televisions collections	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games	**************************************
Yes. Describe	•••	\$
8. Collectibles of value Examples: Antiques as stamp, coir No Yes. Describe	ad figurines; paintings, prints, or other artwork; books, pictures, or other art objects; , or baseball card collections; other collections, memorabilia, collectibles	\$
9. Equipment for sports Examples: Sports, pho and kayaks No Yes. Describe	tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ; carpentry tools; musical instruments	
10. Firearms	s, shotguns, ammunition, and related equipment	\$
11.Clothes	othes, furs, leather coats, designer wear, shoes, accessories	\$ 300,000
12. Jewelry Examples: Everyday je gold, silver	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
No Yes. Describe		\$
13.Non-farm animals Examples: Dogs, cats,	birds, horses	
No Yes. Describe		\$
14. Any other personal an	d household items you did not already list, including any health aids you did not list	
No		

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Debtor 1

Case number (# known)_

		37	m	
	<i>y</i> - 1	7 3	4	
ш				50

Describe Your Financial Assets

Do you own or have any	/ legal or equitable interest	in any of the foll	owing?			Current value of the portion you own? Do not deduct secured claim or exemptions.
16. Cash <i>Examples:</i> Money you	have in your wallet, in your h	nome, in a safe de	posit box, and c	n hand when you	i file your petiti	lon
No						
. —		•••••••••••••••••••••••••••••••••••••••		·····	Cash:	\$
and other s	savings, or other financial acc similar institutions. If you have	counts; certificates e multiple account	s of deposit; sha s with the same	res in credit unior institution, list ea	ns, brokerage f ch.	houses,
Yes		Institution nam	ne:			
	17.1. Checking account:					\$
	17.2. Checking account:					\$
	17.3. Savings account:					\$
	17.4. Savings account:		***************************************			\$
	17.5. Certificates of deposit:					
	17.6, Other financial accoun	<u> </u>				
	17.7. Other financial accoun	t:				
	17.8. Other financial accoun	t:				
	17.9. Other financial accoun	t:	***			
	or publicly traded stocks					
Examples: Bond funds,	investment accounts with bro	okerage firms, mo	ney market acc	ounts		
Yes	Institution or issuer name:					
						\$
						\$
			***************************************			\$
9. Non-publicly traded s an LLC, partnership, a	tock and interests in incorp and joint venture	oorated and unin	corporated bus	sinesses, includi	ng an interes	t in
No	Name of entity:				% of ownershi	ip:
Yes. Give specific information about					0%	% \$
them					0% %	% \$
				*************************************	0%%	% \$

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Debtor 1 THE GOLD S
First Name Middle Name Last Name

Case number (if known)____

No			
Yes. Give specific information about	Issuer name:		
them			\$
			\$
			\$
etirement or pension	accounts		
		401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
No		•	
Yes. List each account separately.	Type of account:	Institution name:	
account separatery.	Type of account.	institution name,	
	401(k) or similar plan		\$
	Pension plan:		\$
	IRA:		\$
	Retirement account:	N	\$
	Keogh:		\$
	Additional account:		
	Additional account:		\$
curity deposits and			\$
ur share of all unused amples: Agreements npanies, or others No	prepayments i deposits you have n with landlords, prepa		
ur share of all unused amples: Agreements npanies, or others No	prepayments i deposits you have n with landlords, prepa	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications	
ur share of all unused amples: Agreements npanies, or others No	prepayments I deposits you have n with landlords, prepa In	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	
ur share of all unused amples: Agreements npanies, or others No	prepayments I deposits you have n with landlords, prepa In Electric: Gas: Heating oil:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$
ur share of all unused amples: Agreements npanies, or others No	prepayments I deposits you have n with landlords, prepa In Electric: Gas: Heating oil:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$
ur share of all unused amples: Agreements npanies, or others No	prepayments I deposits you have n with landlords, prepa In Electric: Gas: Heating oil:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$
ur share of all unused amples: Agreements npanies, or others No	prepayments I deposits you have n with landlords, prepa In Electric: Gas: Heating oil:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
ur share of all unused amples: Agreements npanies, or others No	prepayments I deposits you have n with landlords, prepa In Electric: Gas: Heating oil: Security deposit on res Prepaid rent:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
ur share of all unused amples: Agreements npanies, or others No	prepayments I deposits you have n with landlords, prepa In: Electric: Gas: Heating oil: Security deposit on rec Prepaid rent: Telephone:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$ \$\$
ur share of all unused amples: Agreements npanies, or others No	prepayments I deposits you have nowith landlords, preparation Interpretation Electric: Gas: Heating oil: Security deposit on recommendation Prepaid rent: Telephone: Water:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
ur share of all unused amples: Agreements appanies, or others	prepayments I deposits you have n with landlords, prepa In: Electric: Gas: Heating oil: Security deposit on rer Prepaid rent: Telephone: Water: Rented fumiture:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
ur share of all unused amples: Agreements inpanies, or others No Yes	prepayments I deposits you have n with landlords, prepa In: Electric: Gas: Heating oil: Security deposit on rer Prepaid rent: Telephone: Water: Rented fumiture: Other:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
ur share of all unused amples: Agreements inpanies, or others No Yes	prepayments I deposits you have n with landlords, prepa In: Electric: Gas: Heating oil: Security deposit on rer Prepaid rent: Telephone: Water: Rented fumiture: Other:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$

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D0	cument Page 17 of 58
Debtor 1 THOU STATE AND LAST Name Last Name	Case number (# known)
Last Name	
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	alified ABLE program, or under a qualified state tuition program.
Institution name and de	escription. Separately file the records of any interests.11 U.S.C. § 521(c):
- And the state of	\$
	\$
	\$
exercisable for your benefit	er than anything listed in line 1), and rights or powers
No No	
Yes. Give specific information about them	\$_
	The Control of the Co
6. Patents, copyrights, trademarks, trade secrets, and Examples; Internet domain names, websites, proceeds	other intellectual property from royalties and licensing agreements
☐ Yes. Give specific	
information about them	\$
Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, coopera No Yes. Give specific	ative association holdings, liquor licenses, professional licenses
information about them	\$
oney or property owed to you?	THE SELECTION SHOWS THE PROPERTY OF THE PARTY OF THE PART
	Current value of the portion you own? Do not deduct secured claims or exemptions.
Tax refunds owed to you	·
-2 No	
Yes. Give specific information	
about them, including whether	Federal: \$
about them, including whether you already filed the returns	Federal:
about them, including whether	
about them, including whether you already filed the returns and the tax years	State: \$
about them, including whether you already filed the returns and the tax years. Family support Examples: Past due or lump sum alimony, spousal supp	State: \$
about them, including whether you already filed the returns and the tax years	State: \$
about them, including whether you already filed the returns and the tax years	State: \$ Local: \$ port, child support, maintenance, divorce settlement, property settlement Alimony: \$ Maintenance: \$
about them, including whether you already filed the returns and the tax years	State: \$ Local: \$ Poort, child support, maintenance, divorce settlement, property settlement Alimony: \$ Maintenance: \$ Support: \$
about them, including whether you already filed the returns and the tax years	State: \$ Local: \$ Port, child support, maintenance, divorce settlement, property settlement Alimony: \$ Maintenance: \$

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers compensation, Social Security benefits; unpaid loans you made to someone else

₽ No

☐ Yes. Give specific information.....

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Page 18 of 58 Document Debtor 1 Case number (if known) 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Ita Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue 1 No Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim..... 35. Any financial assets you did not already list Yes. Give specific information..... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ☐ No Yes. Describe....

Official Form 106A/B

Yes. Describe...

☐ No

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, moderns, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

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Debtor 1	11+10	\mathfrak{I}		iones_	Case number (if known)
	First Name	Ministra Magazi	Lock	Nome	

40. Machinery, fixtures, equipment, supplies you use in business, and too	
n No	•
Yes. Describe	
_ 100. 50001b0	\$
M. Incompany	
I1. Inventory No	
☐ Yes. Describe	
	>
12. Interests in partnerships or joint ventures	
□ No	
Yes. Describe Name of entity:	
iname of entity:	% of ownership:
	Ψ
	% \$
4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	% \$
3. Customer lists, mailing lists, or other compilations	
No	
Yes. Do your lists include personally identifiable information (as de	fined in 11 U.S.C. § 101(41A))?
□ No	
☐ Yes. Describe	
	\$
	• • • • • • • • • • • • • • • • • • • •
6.Do you own or have any legal or equitable interest in any farm- or comm No. Go to Part 7. Yes. Go to line 47.	nercial fishing-related property?
	Current value of the
	portion you own?
. Farm animals	Do not deduct secured cl
. (4111 4111114)3	· · · · · · · · · · · · · · · · · · ·
Examples: Livesteck, poultry, farm-raised fich	Do not deduct secured cl
	Do not deduct secured cl
Examples: Livestock, poultry, farm-raised fich	Do not deduct secured cl
Examples: Livesteck, poultry, farm-raised fich No	Do not deduct secured cl

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56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 62. Total personal property. Add lines 56 through 61, Copy personal property total ->

63. Total of all property on Schedule A/B. Add line 55 + line 62.

Debtor 1

Part 7:

Part 8:

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Fill in this information to identify your	case:		
Debtor 1 First Name M	ddle Name Last Name	5	
Debtor 2 (Spouse, if filing) First Name Mi	ddle Name Last Name		
United States Bankruptcy Court for the:	NM District of		
Case number (If known)			☐ Check if this is an amended filing
Official Form 106C			
Schedule C: The I	Property You	Claim as Exempt	04/16
Be as complete and accurate as possible. I Using the property you listed on <i>Schedule</i> a space is needed, fill out and attach to this p your name and case number (if known).	VB: Property (Official Form 106	A/B) as your source, list the property that	you claim as exempt. If more
For each item of property you claim as e specific dollar amount as exempt. Altern of any applicable statutory limit. Some e retirement funds—may be unlimited in d limits the exemption to a particular dolla would be limited to the applicable statute.	atively, you may claim the ful xemptions—such as those fo ollar amount. However, if you r amount and the value of the	ll fair market value of the property bein r health aids, rights to receive certain k claim an exemption of 100% of fair ma	g exempted up to the amount penefits, and tax-exempt rket value under a law that
Part 1: Identify the Property You	Claim as Exempt		
 Which set of exemptions are you classified and you are claiming state and federal and You are claiming federal exemptions. For any property you list on Schedul. 	nonbankruptcy exemptions. 11 ss. 11 U.S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	
Brief description of the property and	4.7	Amount of the exemption you claim	Specific laws that allow exemption
Schedule A/B that lists this property	portion you own Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	\$	□ \$	***
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:			
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	Q \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
3. Are you claiming a homestead exem	otion of more than \$160,375?		
(Subject to adjustment on 4/01/19 and		s filed on or after the date of adjustment.)	
No Yes. Did you acquire the property c	overed by the exemption within	1,215 days before you filed this case?	
☐ No ☐ Yes			

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Case number (if known)___

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B;	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your cas	e;			
Debtor 1 Tittany	Jones			
First Name Middle N Debtor 2	ame Last Name			
(Spouse, if filing) First Name Middle N				
United States Bankruptcy Court for the: NO(11)	District of			
Case number (If known)			☐ Check i	if this is an
			amende	ed filing
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Secure	ed by Prop	erty	12/15
Be as complete and accurate as possible.	If two married people are filing together, both are ed the Additional Page, fill it out, number the entries,	ually responsible fo	or supplying correct	any
additional pages, write your name and cas	e number (if known).	ind attach it to this	ionis. On the top of	any
Do any creditors have claims secured b	y your property?			
No. Check this box and submit this form	n to the court with your other schedules. You have nothi	ng else to report on t	nis form.	
Yes. Fill in all of the information below.				
Part 1: List All Secured Claims				
A 200 A		Column A	Column B	Column C
	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
As much as possible, list the claims in alph	abetical order according to the creditor's name.	value of collateral.	claim	If any
2.1	Describe the property that secures the claim:	\$	\$;	5
Greditor's Name				
Number Street		J		
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	•		
community debt				
Date debt was incurred	Last 4 digits of account number		Anapagangan pananan mananan / arawan 120 (penjar 12) kenjara penjara belahasi	t Contraten entire en enema president
Creditor's Name	Describe the property that secures the claim:	\$	\$ 	·
		1		
Number Street	As of the date you file, the claim is: Check all that apply.	j		
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax tien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
☐ Check if this claim relates to a community debt	, , , , , , , , , , , , , , , , , , ,			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	\$	ing the state of the first few feet and provide a condition of all the state.	er en en en general de la colònica de la colònica en

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Debtor 1

LH	and		0	res	٠
First Name	Middle Name	Last Nam	ne 1		

Case number (if known)_____

Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				Ψ
Number Street	-			
	 As of the date you file, the claim is: Check all that apply. 			
City State ZIP Code	Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
At least one of the debtors and another	Other (including a right to offset)			
Check if this claim relates to a community debt	Cities (moduling a right to offset)			
Date debt was incurred	Last 4 digits of account number			
The complete magnetic states in the control of the	Describe the property that secures the claim:		\$	**************************************
Creditor's Name		7		· · · · · · · · · · · · · · · · · · ·
Number Street				
State Control	As of the date you file, the claim is: Check all that apply.	j		
	Contingent			
	☐ Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only				
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	Describe the property that secures the claim:		\$	ellain tahlain (ahlisenga) (ancanta atauta atau
Number Street				
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contingent			
City State 21F Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax fien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
	s in Column A on this page. Write that number here:			
	add the dollar value totals from all pages.	\$		

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Deblor 1

First Name Middle Name Last Naute

Case number (if known)

ou nave mo	ore than one creditor for a or any debts in Part 1, do r	iv of the debts tha	t vou listed in Part 1.	the creditor in Part 1, and then list the collection agency here. Similarly, list the additional creditors here. If you do not have additional persons
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			<u></u>
City				·
**************************************	and the second of the second s	State	ZIP Code	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			

City	entwissensverserseriet i energy en versteringstelle en vers	State	ZIP Code	
Name				On which line in Part 1 did you enter the creditor?
ivame				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	- -
		Orace	ZIF COUR	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
<u> </u>				- -
City	e to the transmission of the contract of the c	State	ZIP Code	On which line in Part 4 did you autor the autor of
Name				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
Number	Street			•
				••
City		State	ZIP Code	
Name				On which line in Part 1 did you enter the creditor?
				Last 4 digits of account number
Number	Street			-
214				•
City		State	ZIP Code	

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Debtor 1 The National Debtor 2 Debtor 3 Debtor 4 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor				
Debics 2 Soons Fifting Full terms Most have Mo	Fill in this information to identify your case:	-		
United States Barkuptry Court for the: United States Barkuptry Court for the Court for the: United States Barkuptry Court for the Court for the States Barkuptry		Last Name		
United States Barkrupty Court for the United Paired of United States Barkrupty Court for the United States Barkrupty Court for the United States Barkrupty Court for the United States Case currence (Ifference) Official Form 106E/F		t ast Nama		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. 12/15 Be a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. 12/15 Be a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. 12/15 Be a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims. 12/15 Be a complete and accurate as possible. Use Part 1 for creditors with PRIORITY described in Schedule Dr. Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you read it is until a facility of the Part 2 for any additional pages, write your name and case number (if known). 10. Do any creditors have priority unsecured claims. If a creditor have more than one priority unsecured claims, list the creditor separately for each claim. Is a claim in the priority unsecured claims, list the claim in a phabetical order according to the creditors aname. If you have priority unsecured claims, list the claims in a phabetical order according to the creditors aname. If you have nonpriority amounts, last that claim have and show both priority and nonpriority amounts. It is that claim have and show both priority and nonpriority amounts. It is that claims in a phabetical order according to the creditors aname. If you have more than two priority unsecured claims, list the other creditors in Part 3. (For an explanation of each type of claim is: If a claim has both priority and nonpriority amounts, list that claims here and show both priority and nonpriority amounts. 10. De part 2 any and a claim is a creditor have more than two priority unsecured claims. 10. De part 2 any any and a community debt and according to the creditors aname. If you have more than two priority unsecured claims. 10. Debtor 2 o	. \ . # .			
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY dains and Part 2 for creditors with NONPRIORITY dalms. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106C). Do not include any redictors with party to make (A/B) and on Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106C). Do not include any redictors with party to meed, fill 1 out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number off known). List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. List all of your priority unsecured claims. If a creditor hea more than one priority ensecured claim, list the creditor separately for each claim. For case claims induced in the continuation Page of Part 1. If more than one priority ensecured claims, list that claim here and show noth priority and comprisity, amounts. As much expossible, list the claims in elabhated-and endored according to the condition booklet.) (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority and conditions and priority and conditions are particular claim. In the other creditor in Part 3. When was the debt incurred? As of the date your file, the claim is: Check all that apply conditions and priority and conditions and priority and priority and conditions are priority and conditions and priority and conditions are priority and conditions. Debtor 2 only Debtor 2 o		ict of		Check if this is an
Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule Als: Preparty (Chitacia Form 1640) and on Schedule 0: Executory Contracts and Interprint Leases (Difficial Form 1640) on to tincute any creditors with partially secured claims that are listed in Schedule 0: Executory Contracts and Interprint Leases (Difficial Form 1640) on to tincute any creditors with partially secured claims that are listed in Schedule 0: Executory Contracts and Interprint Leases (Difficial Form 1640) on the lost of the last. Attach the Continuation Page to this page. On the top of any additional pages, write your name dease number (if known). Do any creditors have priority unsecured claims. If a creditor has more than none priority unsecured claims, list the creditor has enough the last and of your priority unsecured claims. If a creditor has more than he both priority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor hame. If you have note than the priority unsecured claims, list on the creditor hame. If you have note than the priority unsecured claims, list on the creditor hame. If you have note than the priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor hame. If you have note than the priority and nonpriority amounts. It is a claim has both pictory and nonpriority amounts. Total claims T				
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule Also Property Contracts and Unexpired Leases (Official Form 1648) and on Schedule 0: Executory Contracts and Unexpired Leases (Official Form 1648) and on Schedule 0: Executory Contracts and Unexpired Leases (Official Form 1648). Do not include any ceditors with partially secured claims that are listed in Schedule 0: Executory Contracts and Unexpired Leases (Official Form 1648). Do not include any additional pages, write your name and case number (if known). Part 11: List All of Your PRIORITY Unsecured Claims against you? No. 60 to Part 2.	Official Form 106E/F			
List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule Als: Property (Official Form 1066). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Party ou need, fill it out, insuffer the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 11: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2: Ves. 1. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim, is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in aphabetical order according to the creditor's name. If you priority unsecured claims, list the creditor separately for each claim. For each claim listed, identify what type of claim, is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in aphabetical order according to the creditor's name. If you priority unsecured claims, list the claims in list the claims in sighated claims, list the claims in sighated claims. The claim is for the confirmation of each type of claim, see the instructions for this form in the instruction booklet.) (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) (For an explanation of each type of claim is check all that apply claims are priority in the claims and credit or claims.) (Claims for death or personal injury while you were intoxicated intoxicated in the claims using the claim	Schedule E/F: Creditors W	ho Have Unsecured Clain	ns	12/15
1. Do any creditors have priority unsecured claims against you? No. Go to Parl 2.	List the other party to any executory contracts or un A/B: Property (Official Form 106A/B) and on Scheducreditors with partially secured claims that are listed needed, copy the Part you need, fill it out, number that any additional pages, write your name and case number that the page is a secure of the page is a secu	nexpired leases that could result in a claim. Also lite G: Executory Contracts and Unexpired Leases (do in Schedule D: Creditors Who Have Claims Securate entries in the boxes on the left. Attach the Continuous (if known).	st executory con Official Form 100 red by Property. I	stracts on <i>Schedule</i> 6G). Do not include any If more space is
No. Go to Part 2.	Part 1: List All of Your PRIORITY Unsecure	d Claims		
2. List all of your priority unsecured claims. If a craditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts. Is a much as possible, list the claims in alphabetical order according to the creditor send and one priority unsecured claims, lift out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) (For an explanation of each type of claim, is the other creditors in the read to be priority and continuing the claim is the claim. In the read to be continuing the claim is the claim is the claim is the claim. In the read to be continuing the claim is the claim is the claim is the claim. In the read to be continuing the claim is for a community debt in curred claim: Debtor 2 only	No. So to Part 2.	against you?		
Contingent Con	 List all of your priority unsecured claims. If a cree each claim listed, identify what type of claim it is. If a nonpriority amounts. As much as possible, list the claimsecured claims, fill out the Continuation Page of F 	a claim has both priority and nonpriority amounts, list the aims in alphabetical order according to the creditor's n Part 1. If more than one creditor holds a particular claim	at claim here and ame. If you have	show both priority and
2.1 City Of Chicago Lipit Code Beority Creditor Plane Street Cast 4 digits of account number Cagingent Cagin	, , , , , , , , , , , , , , , , , , , ,	on the second se	Total claim	
When was the debt incurred? As of the date you file, the claim is: Check all that apply Coglingent Uniquidated Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Priority Creditor's Name Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Coglingent Uniquidated Disputed Debtor 1 and Debtor 2 only Debtor 1 snice Check if this claim is for a community debt Is the claim subject to offset? Number Street As of the date you file, the claim is: Check all that apply Contingent Uniquidated Disputed Check if this claim is for a community debt Debtor 1 anl Debtor 2 only Debtor 1 anl Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death o	LICITU Children Co		6 180°	amount amount
Who incurred the debt? Check one. Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Priority Creditor's Name Number Street As of the date you file, the claim is: Check all that apply City State ZIP Code Who incurred the debtors and another Debtor 2 only No incurred the debtors and another Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Other, Specify Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify Other, Specify Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify Other, Specify Other, Specify Other, Specify Other, Specify Other, Specify Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated	P.O. BOX 88243	When was the debt incurred? 2013	i	1 · .
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 9 o	CP:000 11 (0008)		1	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Street As of the date you file, the claim is: Check all that apply City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Unliquidated Unliquidated Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Disputed Claims for death or personal injury while you were intoxicated Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Unliquidated Claims for death or personal injury while you were intoxicated on the debts of the debtors and another Claims for death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the death or personal injury while you were intoxicated on the deat	City State ZIP Code			
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Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Priority Creditor's Name City State City State Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Who incurred the debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Unliquidated Disputed Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify Other. Specify Other. Specify Other. Specify		·		
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Last 4 digits of account number Street As of the date you file, the claim is: Check all that apply Contingent Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Is the claim subject to offset? Other. Specify		**		·
Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Other. Specify Other Specify Other. Specify Other Specify Other. Speci				
Other. Specify Othe	☐ Check if this claim is for a community debt			
2.2 Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Last 4 digits of account number \$ \$ \$ When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Other. Specify				
Last 4 digits of account number \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	☐ Yes			
When was the debt incurred? As of the date you file, the claim is: Check all that apply City State ZIP Code Unliquidated Unliquidated Unliquidated Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify Other, Specify				
As of the date you file, the claim is: Check all that apply City State ZIP Code Unliquidated Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify Other, Specify	Priority Creditor's Name		\$	\$\$_
Contingent City State ZIP Code Unliquidated Unliquidated Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	Number Street	An of the date year file the date to OL 1 Hill 1		
City State ZIP Code Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Taxes and certain other debts you owe the government Check if this claim is for a community debt Is the claim subject to offset? Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify				
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify Other, Specify	City State ZIP Code			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Debtor 1 and Debtor 2 only □ Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify				
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	Debtor 1 only	Type of PRIORITY uncoured claims		
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Check if this claim is for a community debt ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify				
Check if this claim is for a community debt Is the claim subject to offset? Claims for death or personal injury while you were intoxicated Other. Specify		•		
Is the claim subject to offset?		Claims for death or personal injury while you were		
U No	is the claim subject to offset? ☐ No			

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Case number (# known)_

Pa	rt 1: Your PRIORITY Unsecured Claims	s — Continuation Page			
Aft		n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
***************************************	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated ☐ Disputed			
	Who incurred the debt? Check one.	Uispaed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Check if this claim is for a community debt	 Claims for death or personal injury while you were intoxicated 			
	- Shock it this claim is for a community dept	Other. Specify			
	Is the claim subject to offset?				
	□ No				
	Yes	et kielet til sekte til et kellet i ett et til ett ett et til ett ett ett ett ett ett ett ett ett et	NA Provident de colonia (neclare) de colonia de la colonia	CONTROL CONTRO	- Talandakon kumilian ekselli jurjih kon kulpiyan dagara
Ĺ		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name				
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	Unliquidated			
	•	Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	_	Claims for death or personal injury while you were intoxicated			
	☐ Check if this claim is for a community debt	Other. Specify			
	Is the claim subject to offset?				
	□ No				
,	☐ Yes		SA SIBILA SA BIANGA AND AND AND AND AND AND AND AND AND AN	CONTROL CONTROL (CONTROL OF SIGNAL O	elligist for North Post, Planks (Vision North State
<u> </u>			\$	\$	\$
	Priority Creditor's Name	Last 4 digits of account number	Φ	Φ	Φ
		When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
	***************************************	Contingent			
	City State ZIP Code	Unliquidated Disputed			
	Who incurred the debt? Check one.	we waputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated	\+@i+bipOrtSeniesborounbullectonumamamama	MAINTENERS LES MESSETT À L'ANGLES À DESCRIPTATA DE L'ANGLES À L'AN	kovivatikos ietoko etalikat tironomotoa Nasi.

☐ No Yes

Is the claim subject to offset?

Other. Specify

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Case number (if known)_

	First Name	Middle Name	Last Name					
Part 2:	List All of	Your NONPRIOR	ITY Unsecured Claims					
-		•	ecured claims against yo					
□ No. □ Yes	.You have no	thing to report in this	s part. Submit this form to the	e court with your other sch	hedules.			
		427			2.7.7	* *	4.54	
4. List all	of your none	priority unsecured	claims in the alphabetical	order of the creditor whi	o holds each	claim. If a credit	or has more than	n one

	No You have nothing to report in this part. Submit this form to the	court with your other schedules.	
•	The same of the sa	4 1 444	A NATIONAL PROPERTY.
4.	List all of your nonpriority unsecured claims in the alphabetical o nonpriority unsecured claim, list the creditor separately for each claim, included in Part 1. If more than one creditor holds a particular claim, list claims fill out the Continuation Page of Part 2.	For each claim listed, identify what type of claim it is. Do not	list claims already
	Λ Δ Σ		Total claim
4.1	Monpriority Creditor's Name Law Magistrate	Last 4 digits of account number	, 1828a
	WH W Front St Rm 303	When was the debt incurred?	
	State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	\sim	☐ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	No.	Other. Specify	
	Yes		
4.2	The state of the s	Last 4 digits of account number	s WU 8.20
	Nonpriority Creditor's Name	When was the debt incurred?	
	P.O. 50x 34x/		
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		Debts to pension or profit-sharing plans, and other similar debts	
	No	Other. Specify	
	Yes	1	нети причинати на причинати и причинати
1.3	Nappriority Craditor's Name	Last 4 digits of account number 1352	12200
	DO POV SOID	When was the debt incurred?	*
	number street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	· · · · · · · · · · · · · · · · · · ·	☐ Contingent	:
	Debtor 1 only	Unliquidated	1
	Debtor 2 only	☐ Disputed	:
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	ray	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	i
	NO NO	Other. Specify	:
	☐ Yes		
			· · · · · · · · · · · · · · · · · · ·

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Debtor 1

Document

Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries of	n this page, number them beginning with 4.	4, followed by 4.5, and so forth.	Total claim
HOOT IQ	of Bank and Trus	Last 4 digits of account number 517	\$\\\[57\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
401 N	Hersney Ru	when was the debt incurred?	
	vaton, 12. 101704	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
Who incurred the debt	? Check one.	Unliquidated Disputed	
Debtor 1 only		'	
Debtor 2 only Debtor 1 and Debtor 2	2 only	Type of NONPRIORITY unsecured claim:	
At least one of the det		Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim	is for a community debt	you did not report as priority claims	
Is the claim subject to	offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
-D No			
☐ Yes			
Nonpriority Creditor's Name Number Street City	Business Byrlai vaissance Dr gl IIL words gl Istate 211 Code	Last 4 digits of account number	s 3870
Who incurred the debt	? Check one.	Unliquidated Disputed	
Debtor 1 only		,	:
Debtor 2 only Debtor 1 and Debtor 2	only	Type of NONPRIORITY unsecured claim:	
At least one of the deb	otors and another	Student loans Obligations arising out of a separation agreement or divorce that	:
☐ Check if this claim i	is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	:
Is the claim subject to	offset?	Other, Specify	
D No D Yes			
Medical	Business Buga	∫ Last 4 digits of account number	\$ 578 <u>00</u>
Nonpriority Creditor's Name	aissance DR	When was the debt incurred?	
Number Sinest	al TI JONOR	As of the date you file, the claim is: Check all that apply.	
City	State ZiP Code	Contingent	:
Who incurred the debt?	? Check one.	Unliquidated Disputed	:
Debtor 1 only		wa Disputed	
Debtor 2 only Debtor 1 and Debtor 2	only	Type of NONPRIORITY unsecured claim:	
At least one of the debi		 Student loans Obligations arising out of a separation agreement or divorce that 	1
_	s for a community debt	you did not report as priority claims	:
is the claim subject to c	•	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
No D Yes			

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Debtor 1

Case number (if known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

i, then li	st the collection a	idency here. Similarly, if you	m you for a debt you owe to someone else, list the original creditor in Parts 1 or have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Part 2: Creditors with Priority Unsecured Claims
City		State ZIP Cod	Last 4 digits of account number
O.19	er energy of the second se	State ZIP God	egan et en en anticomentario de deservo acceso en exercisamente de magnetario de mante de casa de como de la c O como en estado de la como en estado en estado en estado en estado en estado de como en estado en estado en e
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Part 2: Creditors with Nonpriority Unsecured Claims
City		State ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Part 2: Creditors with Nonpriority Unsecured
			Claims
City	2011 2020/00/00/00	State ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Part 2: Creditors with Nonpriority Unsecured Claims
City		State ZIP Code	Last 4 digits of account number
	the control many and the gas to the control of the gas		On which entry in Part 1 or Part 2 did you list the original creditor?
lame			Line of (Cheek and) D. Bert to Conditions (th. B.) It is
Number	Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
			Claims Claims
City	Seferia de la companya de la company	State ZIP Code	Last 4 digits of account number
lame			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street		Part 2: Creditors with Nonpriority Unsecured Claims
ity		State ZIP Code	Last 4 digits of account number
lame	ern Leiste in State Baller (der 1900 in 1900 i In 1900 in 190	amagement states on over mension themps daying personal state and one st	On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street		Part 2: Creditors with Nonpriority Unsecured Claims
*			
ity	***************************************	State ZIP Code	Last 4 digits of account number

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Debtor 1

First Name Middle Name Lawriane

Case number (# known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a	. Domestic support obligations	6a.	\$
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$
	6c	Claims for death or personal injury while you were intoxicated	6c.	\$
	6d	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$
	6e.	Total. Add lines 6a through 6d.	6e.	\$
				Total claim
otal claims	6f.	Student loans	6f.	Total claim
otal claims rom Part 2		Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	\$
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority		
rom Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	\$

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3	ill in this i	nformation to identify your case:		
93473	<=	THE		
	ebtor	First Name Middle Name Last Name		
	ebtor 2 pouse If filing)			
U	nited States	Bankruptcy Court for the: WYHKMDistrict of		
	ase number (known)			Check if this is an amended filing
<u> </u>	fficial F	10CO		
		Form 106G		
-		ule G: Executory Contracts and		12/15
info	rmation. I	ete and accurate as possible. If two married people are filing to if more space is needed, copy the additional page, fill it out, no ges, write your name and case number (if known).	gether, both are equally responsible for supplyi imber the entries, and attach it to this page. On	ng correct the top of any
1.	Do you b	eave any executory contracts or unexpired leases?		
,.	☑ No. C	theck this box and file this form with the court with your other scheol	lules. You have nothing else to report on this form.	
	Yes. I	Fill in all of the information below even if the contracts or leases are	listed on Schedule A/B: Property (Official Form 10	6A/B).
2.	List sepa example, unexpired	rately each person or company with whom you have the contr , rent, vehicle lease, cell phone). See the instructions for this forn I leases.	act or lease. Then state what each contract or le n in the instruction booklet for more examples of exe	ease is for (for ecutory contracts and
	1.3	en en Anna Albania en la Anna en la Santa en la Santa Anna en la Santa Anna en la Santa Anna en la Santa Anna e	THE TAXABLE SERVICES AND A CONTROL OF	a Boots dan Loodstaa
	Person o	or company with whom you have the contract or lease	State what the contract or lease is for	
2.1			The state of the s	
	Name			
	Number	Street		
	Ciby	C. 4. 710		
2.2	City	State ZIP Code	engen et tree i i i i i i i i i i i i i i i i i i	ero Generalita mandalita oran montali control incentivo di se
4.4	Name			
	Number	Street		
		Olitet.		
2.3	City	State ZIP Code	Secretarism and the transfer of the test of the test of the communication of the contract and announce integral of the	the common constraints of the first prime to a tradition of this character common or them to the
	Name			•
	Number	Street		
2.4	City	State ZIP Code	tall in a commence of the properties of the prop	n Phase valuation and the second disconnection and
	Name			
	Number	Street		
	City			
2.5 _.	City	State ZIP Code	A section of the sect	And the state of the second
	Name			
	Number	Street		
	City	State ZIP Code		

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Debtor 1 Case number (if known) Additional Page if You Have More Contracts or Leases Person or company with whom you have the contract or lease What the contract or lease is for 2<u>2</u> Name Number Street City State ZIP Code 2.__ Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code 2.__ Name Number Street City State ZIP Code 2._ Name Number Street City ZIP Code State 2._ Name Number Street City State ZIP Code Name Number Street City State ZIP Code Name

City

Number

Street

State

ZIP Code

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Fill in this information to identify your case:	1
THE ALL Chass	
Debtor 1 First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) First Name Migdle Name Last Name	
United States Bankruptcy Court for the: Dethin District of	
Case number (If known)	_
	☐ Check if this is an amended filing
Official Form 106H	amended ming
Schedule H: Your Codebtors	12/15
Codebtors are people or entities who are also liable for any debts you may have. Be are filing together, both are equally responsible for supplying correct information. If and number the entries in the boxes on the left. Attach the Additional Page to this process number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse and the last 8 years, have you lived in a community property state or territory. Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Was No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time. No No No No No No No No No N	more space is needed, copy the Additional Page, fill it out, age. On the top of any Additional Pages, write your name and as a codebtor.) 17 (Community property states and territories include shington, and Wisconsin.)
Number Street	-
City State ZIP Code	-
 In Column 1, list all of your codebtors. Do not include your spouse as a codebto shown in line 2 again as a codebtor only if that person is a guarantor or cosigne Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor 	er. Make sure you have listed the creditor on
Name	Schedule D, line
Number Street	☐ Schedule E/F, line
	Schedule G, line
City State ZIP Code 3.2	
Name	D Schedule D, line
	Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZIP Code	
Name	Schedule D, line
	☐ Schedule E/F, line
Number Street	Schedule G, line
City State ZIP Code	

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Debtor 1

Tiff	any	clones
irst Name	Middle Name	Last Name

Case number (#known)_____

	Column	1: Your codebtor			Column 2: The creditor to whom you owe the del
3	!				Check all schedules that apply:
	Name				Schedule D, line
	140(1)0				☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City				-
3	City		State	ZIP Code	
	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	_
-	***************************************				O Sahadula D lina
	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	-
_					
	Name				Schedule D, line
	Number	Street			Schedule E/F, line
		3.100			
7	City		State	ZIP Code	-
	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	-
_			State	ZIF Code	
	Name				Schedule D, line
	Number	Chroni			Schedule E/F, line
	Nomber	Street			Schedule G, line
	City		State	ZIP Code	
_]	Name				Schedule D, line
	Hanna				Schedule E/F, line
	Number	Street			☐ Schedule G, line
	City				
J	City		. State	ZIP Code	
	Name				☐ Schedule D, line
					☐ Schedule E/F, line
	Number	Street			☐ Schedute G, line

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Fill in this information to identify	y your case:	10000					
Debtor 1 First Name	Middle Name	Last Name					
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:	NOTHER District of	1_					
Case number	£ -			Check if t	thie ie:		
(If known)		•			nended filing		
		VIII.			plement showing po	stpetition chapt	er 13
Official Form 106I					e as of the following		
				MM / [/ DD / YYYY		
Schedule I: You	ir income					12/	15
Be as complete and accurate as p supplying correct information. If y If you are separated and your spo separate sheet to this form. On the Part 1: Describe Employn	ou are married and not the use is not filing with you, a top of any additional pa	ling jointly, and you	our spouse is iformation ab	s living with y	ou, include informat	tion about your s	
Fill in your employment information.		Debtor 1			Debtor 2 or non	-filing spouse	
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☐ Not employ	ved .		☐ Employed ☐ Not employed	4	
Include part-time, seasonal, or self-employed work.			,		— Not omployed	1	
Occupation may include student or homemaker, if it applies.	Occupation						
	Employer's name		····				****
	Employer's address	Number Street			Number Street		Maria de Ma
		Cíty	State ZIP	Code	City	State ZIP Code	
	How long employed the	re?					
Part 2: Give Details About	Monthly Income						
Estimate monthly income as of spouse unless you are separated. If you or your non-filing spouse ha	ve more than one employe	er, combine the info					ìg
below. If you need more space, at	tach a separate sheet to th	is form.			•	ies	
2 Lint monthly and			For	Debtor 1	For Debtor 2 or non-filing spouse	From	
 List monthly gross wages, sala deductions). If not paid monthly, 	iry, and commissions (be calculate what the monthly	fore all payroll wage would be.	2. \$		\$		
3. Estimate and list monthly over	time pay.		3. +\$		+ \$	_	
4. Calculate gross income. Add lin	e 2 + line 3.		4. \$		\$		

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Document

Debtor 1

Tit	fany	Jones	
First Name	Middle Name	Last Name	

Case number (if known)_____

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	→ 4.	\$	_ \$
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	¢	¢
5b. Mandatory contributions for retirement plans	5b.	Ψ	_
5c. Voluntary contributions for retirement plans	5c.	\$	
5d. Required repayments of retirement fund loans	5d.	\$	\$\$ \$
5e. Insurance	5e.	\$	
5f. Domestic support obligations	5f.	\$	\$
5g. Union dues	5g.	\$	\$
5h. Other deductions. Specify:	•	+\$	-
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.		. 4	
	6.	\$	\$
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm			
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			
monthly net income.	8a.	\$	\$
8b. Interest and dividends	8b.	\$	\$
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	nt		* ************************************
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$
8d. Unemployment compensation	8d.	\$	\$
8e. Social Security	8e.	\$	\$
8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$_	\$
8g. Pension or retirement income	0		
Ol. Acc	8g.	\$	\$
	8h	+ \$	+\$
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		\$	+ \$ = \$
	10.		
11. State all other regular contributions to the expenses that you list in Schedulinclude contributions from an unmarried partner, members of your household, you friends or relatives.	<i>ile J.</i> ur de _l	pendents, your roo	mmates, and other
Do not include any amounts already included in lines 2-10 or amounts that are no	ot ava	ilable to nav evnen	sas listed in Schodula 1
Specify:		made to pay expen	11. + \$
12. Add the amount in the last column of line 10 to the amount in line 11. The re Write that amount on the Summary of Your Assets and Liabilities and Certain Sta	esult is etistica	s the combined mo al Information, if it a	nthly income. pplies 12. Combined
13. Do you expect an increase or decrease within the year after you file this fol	rm?		monthly income
Yes. Explain:	****		

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Debtor 1 Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Case number (If known)		led filing nent showing postp as of the following	
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are fili information. If more space is needed, attach another sheet to this form (if known). Answer every question.			
Part 1: Describe Your Household			
 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for S 	Separate Household of Debtor 2.		
2. Do you have dependents? Do not list Debtor 1 and Yes, Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2. each dependent Do not state the dependents' names.	Son Daughter Daughter Son	12 9 8 2	No Yes
3. Do your expenses include expenses of people other than yourself and your dependents? Yes Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you a expenses as of a date after the bankruptcy is filed. If this is a supplemental applicable date.	ental <i>Schedule J</i> , check the box a		
Include expenses paid for with non-cash government assistance if you such assistance and have included it on Schedule I: Your Income (Offi		Your expe	nses
 The rental or home ownership expenses for your residence. Include any rent for the ground or lot. 	first mortgage payments and	4. \$	
If not included in line 4:			_
4a. Real estate taxes		4a. \$	<u>)</u>
4b. Property, homeowner's, or renter's insurance		4b. \$	
4c. Home maintenance, repair, and upkeep expenses		4c. \$	UT (00), 000
4d Homeowner's association or condominium dues		4d. \$	ノ

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Debtor 1 First Name Middle Name Last Name Case number (it known)_______

			Your expenses
5	5. Additional mortgage payments for your residence, such as home equity loans	5.	\$
6	5. Utilities:		
	6a. Electricity, heat, natural gas	6a.	s O
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other Specify:	6d.	\$
7	. Food and housekeeping supplies	7.	<u>≈ 776.00</u>
8	. Childcare and children's education costs	8.	s (2)
9.	Clothing, laundry, and dry cleaning	9.	\$ 0
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	s
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	s
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	sO
14.	Charitable contributions and religious donations	14.	s_ O
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	•
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	8
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	s
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	s
	17c. Other. Specify:	17c.	\$ (0)
	17d. Other. Specify:	17d.	\$
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	s
9.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
0.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$ (
	20d. Maintenance, repair, and upkeep expenses	20d.	s
	20e. Homeowner's association or condominium dues	20e.	\$ 6

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Debtor 1 First Name Middle Name Last Name	Case number (if known)	
21. Other, Specify:	21.	+\$
22. Calculate your monthly expenses.		
22a. Add lines 4 through 21.	22a.	s 70,00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	s 776.00
22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	s_760
 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 	23a. 23b. 23c.	\$
24. Do you expect an increase or decrease in your expenses within the year after you are for example, do you expect to finish paying for your car loan within the year or do you expect to increase or decrease because of a modification to the terms of you have. I No	pect your r mortgage?	ng Soon.

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	Debtor 2 Spouse, if filling) First Name United States Bankruptcy Court for the: Case number (If known)	Middle Name Last Name Midgle Name Last Name		nded fi ement es as o	showing post f the following	petition chapter 13 g date:
0	Official Form 106J-2	-				
S	chedule J-2: E	xpenses for Sepa	rate Household	of [)ebtor :	2 12/15
De one que	ebtor 2 have one or more depend ly with respect to expenses for l	eparate households?	s on both Schedule J and this f hedule J. Be as complete and a	orm. A	I <i>nswer the qu</i> e as possible.	estions on this form If more space is
	Yes					
2. [Do you have dependents?	□ No	Dependent's relationship to		Dependent's	Does dependent live
r	Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.	Yes. Fill out this information for each dependent	Debtor 2:		age	with you? No Yes
	Do not state the dependents' names.			_		□ No □ Yes
				-		☐ No ☐ Yes
					····	☐ No ☐ Yes
				_		☐ No ☐ Yes
e y	Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	□ No □ Yes				
Par	t 2: Estimate Your Ongoi	ng Monthly Expenses				
exp Incl	penses as of a date after the ban lude expenses paid for with non	-cash government assistance if you	know the value of	ent in a	Chapter 13 c	
4.		it on Schedule I: Your Income (Offic xpenses for your residence. include	•	4.	\$	
	If not included in line 4:			7.		
	4a. Real estate taxes			4a.	\$	
	4b. Property, homeowner's, or re	enter's insurance		4b.	\$	
	4c. Home maintenance, repair, a	and upkeep expenses		4c.	\$	The state of the s
	4d. Homeowner's association or	condominium dues		4d.	\$	

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lebtor 1 First Name Middle Name Last Name

Case number (if known)

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other, Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom-	э.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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De	btor 1 First Name Case number (if know	n)	
21.	Other. Specify:	21.	+\$
22.	Your monthly expenses. Add lines 5 through 21. The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2.	22.	\$
23.	Line not used on this form.		
24.	Do you expect an increase or decrease in your expenses within the year after you file this form?		
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
	□ No.		rangen a marangan ang ang ang ang ang ang ang ang an
	Yes. Explain here:		

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Fill in this information to identify your case:	
Debtor 1 First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Nother District of	
Case number (If known)	
	☐ Check if this is a amended filing
	amenoed may
Official Form 106Dec	
Declaration About an Individual Debtor	r's Schedules 12/15
If two married people are filing together, both are equally responsible for supplying corre	
A \$20,000 A \$0.000 A \$10.000 A	
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bank	cruptcy forms?
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bank	cruptcy forms? uptcy Petition Preparer's Notice, Declaration, and
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bank No Yes. Name of person Attach Banko	
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bank No Yes. Name of person Attach Banko	uptcy Petition Preparer's Notice, Declaration, and
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bank No Yes. Name of person Attach Banko	uptcy Petition Preparer's Notice, Declaration, and
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bank No Yes. Name of person Attach Bankr Signature (Of	uptcy Petition Preparer's Notice, Declaration, and ficial Form 119).
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bank No Yes. Name of person Attach Bankr Signature (Of Under penalty of perjury, I declare that I have read the summary and schedules filed we that they are true and correct.	uptcy Petition Preparer's Notice, Declaration, and ficial Form 119).
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bank No Yes. Name of person Attach Banker Signature (Of Under penalty of perjury, I declare that I have read the summary and schedules filed we that they are true and correct.	uptcy Petition Preparer's Notice, Declaration, and ficial Form 119).

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Fill in this information to identify your case:				
Debtor 1 Ti Han DU	. Ince	. Q		
First Name Middle Name Debtor 2	Last Name			
(Spouse, if filing) First Name	Last Name			
United States Bankruptcy Court for the: Wift District Case number	of			
(if known)			Ę	Check if this is an amended filing
Official Form 107				
Statement of Financial Affair	s for Indiv	iduals Filing fo	or Bankruptc	y 04/16
Be as complete and accurate as possible. If two marri information. If more space is needed, attach a separa number (if known). Answer every question.	ed people are filing te sheet to this for	g together, both are equall m. On the top of any additi	/ responsible for supplyi onal pages, write your n	ing correct ame and case
Part 1: Give Details About Your Marital Stat	us and Where Y	ou Lived Before		
1. What is your current marital status?				
☐ Married Not married				
2. During the last 3 years, have you lived anywhere of No Yes. List all of the places you lived in the last 3 yes.			and the subject	Dates Debtor 2 lived there
		☐ Same as Debtor 1		☐ Same as Debtor 1
Number Street	From 2009	No. of the control of		From
manus cites 5	To 2014	Number Street		To
Bloomington, IL id	704			
City State ZIP Code		City	State ZIP Code	
		Same as Debtor 1		Same as Debtor 1
Number Street	From	Number Street		From
	10			To
City State ZIP Code		City	State ZIP Code	
3. Within the last 8 years, did you ever live with a spo states and territories include Arizona, California, Idaho No Q Yes. Make sure you fill out Schedule H: Your Code	o, Louisiana, Nevad	a, New Mexico, Puerto Rico.	erty state or territory? (C Texas, Washington, and	Community property Wisconsin.)
Part 2: Explain the Sources of Your Income				
Explain the sources of four income				

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ebtor 1 First Name Middle Name Last	JONES Name	Case nu	mber (if known)	
4. Did you have any income from employment Fill in the total amount of income you received If you are filing a joint case and you have income No	d from all jobs and all busi	nesses, including part-tir	ne activities.	ndar years?
Yes. Fill in the details.	A SA ESA SEA ASTA SA EN CANDANA.		DANNAN STANDART SOLUTION HIERARD A TORRO D	Mariana (m. 1881). Sa mariana da da da daganasa (m. 1881).
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	<u>\$ 450.00</u>	Wages, commissions, bonuses, tips Operating a business	\$
For last calendar year: (January 1 to December 31, 2010)	Wages, commissions, bonuses, tips Operating a business	s_45000	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For the calendar year before that: (January 1 to December 31,	Wages, commissions, bonuses, tips Operating a business	<u>\$ 400,00</u>	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
Did you receive any other income during the Include income regardless of whether that income unemployment, and other public benefit payment gambling and lottery winnings. If you are filing List each source and the gross income from each	ome is taxable. Examples ents; pensions; rental inco a joint case and you have	of other income are alim me; interest; dividends; income that you receive	money collected from lawsund together, list it only once	its; royalties; and
Ves. Fill in the details.		not include income that	you instea in fine 4.	
	Debtor 1		Debtor 2	
	Sources of Income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages	\$ 450.00 \$		\$ \$ \$
For last calendar year:				\$
(January 1 to December 31,)				\$ \$
For the calendar year before that:		5		\$

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Debtor 1	First Name Middle Name	Last Name	3	_ Ca	se number (# known)	
Part 3:	List Certain Paymer	nts You Made Befor	re You Filed	l for Bankruptcy		1446-7-1
6. Are eith	ner Debtor 1's or Debtor	r 2's debts primarily c	onsumer deb	te?		
	Neither Debtor 1 nor I	Debtor 2 has primarily	consumer de	ebts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as
	"incurred by an individu	al primarily for a persor	nal, family, or l	nousehold purpose."		(6) 45
	During the 90 days before	ore you med for pankrup	otcy, ala you p	ay any creditor a total	of \$6,425* or more?	
	child support a	ou paid that creditor. Do ind alimony. Also, do no	o not include p ot include payr	ayments for domestic ments to an attorney f	ne or more payments and the support obligations, such as or this bankruptcy case.	
	and the same of th				or after the date of adjustment.	
-≠ Yes	During the 90 days befor				of \$600 or more?	
	No. Go to line 7.	no you mou for bankiup	ncy, and you p	ay arry creditor a total	al \$600 of filore?	
	Yes. List below each creditor. Do no	n creditor to whom you t include payments for do not include payment	domestic supp	ort obligations, such a	e total amount you paid that as child support and case.	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name			\$	\$	☐ Mortgage
	Creditor's Name					☐ Car
	Number Street					Credit card
						Loan repayment
						Suppliers or vendors
	City	State ZIP Code				Other
	Creditor's Name			\$	\$	☐ Mortgage
						☐ Car
	Number Street					Credit card
						Loan repayment
	***************************************					Suppliers or vendors
	City	State ZIP Code				Other
						•
	Creditor's Name			\$	<u> </u>	☐ Mortgage
	Greater a Maria					☐ Car
	Number Street					Credit card
	,					Loan repayment
		MANAGEM A SANAGE VIII				Suppliers or vendors
	City	State ZIP Code				Other

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		en special and a facility of the second of t	and the control of th)
Insiders corporati agent, in such as No	tions of which you are a ncluding one for a busin child support and alime	any general partners; an officer, director, per ness you operate as a ony.	relatives of any son in control, c	general partners; or owner of 20% or	partnerships of whice more of their voting	who was an insider? ch you are a general partner; group securities; and any managing r domestic support obligations,
⊶ Yes.	List all payments to an	i insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insic	der's Name		·	\$. \$	
Num	nber Street		-			
City		State ZIP Code				
				\$	\$	· · · · · · · · · · · · · · · · · · ·
Insid Numl	ler's Name leber Street					
City		State ZIP Code				
/:4L:_ 4 .	vana kadama ditu it	£				
n inside nclude pa	year before you filed er? ayments on debts guar List all payments that b	ranteed or cosigned by		ayments or trans	fer any property o	n account of a debt that benefited
n inside iclude pa	er? ayments on debts guar	ranteed or cosigned by		ayments or trans Total amount paid		Reason for this payment
No Yes. L	er? ayments on debts guar	ranteed or cosigned by	an insider.	Total amount	Amount you still	Reason for this payment
No Yes. L	er? ayments on debts guar List all payments that b	ranteed or cosigned by	an insider.	Total amount paid	Amount you still owe	Reason for this payment
No Yes. L	ayments on debts guar List all payments that b	ranteed or cosigned by	an insider.	Total amount paid	Amount you still owe	Reason for this payment
No Yes. L	ayments on debts guar List all payments that b	ranteed or cosigned by enefited an insider.	an insider.	Total amount paid	Amount you still owe	Reason for this payment
No Yes. L	ayments on debts guar List all payments that b er's Name per Street	ranteed or cosigned by enefited an insider.	an insider.	Total amount paid	Amount you still owe	Reason for this payment

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First Name Middle Name Dast Name	25	Case number (if known)	
: Identify Legal Actions, Repossess	sions, and Foreclosure	es	
hin 1 year before you filed for bankruptcy, of all such matters, including personal injury cas contract disputes.	were you a party in any la	wsuit, court action, or administrati	ve proceeding? ons, support or custody modif
No			
Yes. Fill in the details.	ja jan aran sawasa	AND TAKE	
· Na	ture of the case	Court or agency	Status of the c
Case title			М.,
Case me		Court Name	Pending On appeal
		Number Street	Concluded Concluded
Case number			_ *************************************
:		City State ZIP	Code
	•		
Case title		Court Name	Pending
			On appeal
Case number		Number Street	Concluded
- Case namber		City State ZIP (Code
	Describe the propert	y Dai	te Value of the prope
Creditor's Name	-		\$
Crossics of Name			
Number Street	Explain what happen	eq	
	Property was re	epossessed.	
	Property was fo		
City State ZiP Code	Property was g	arnished. Itached, seized, or levied.	
	Describe the property	and the state of t	e Value of the prop
	elektrik filozofia	Maria Mariana, a para Maria	. Tomo or the prop
			\$
Creditor's Name			
Number Street	Explain what happens	ad .	
	Property was re	possessed.	
	Property was fo		
City State ZIP Code	Property was ga		
	Property was at	tached, seized, or levied,	

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First Name Middle Name East	Case number (# known)		
			•
thin 90 days before you filed for bankru	optcy, did any creditor, including a bank or financial institu	tion, set off any a	ımounts from you
counts or refuse to make a payment bed	cause you owed a debt?		
Yes. Fill in the details.			
	Describe the action the creditor took	1.5	and the second
	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name			
Number Street	· -		\$
	- [
City State ZIP Code	Last 4 digits of account number: XXXX—		
hin 1 year before you filed for bankrupt	cy, was any of your property in the possession of an assig	nee for the bene	fit of
ditors, a court-appointed receiver, a cus	stodian, or another official?	,	··- **
No			
Yes			
List Certain Gifts and Contribu	tions		
nin 7 sanana kafana seas filad fan kantus			
	tcy, did you give any gifts with a total value of more than \$	600 per person?	
No	tcy, did you give any gifts with a total value of more than \$	600 per person?	
No	tcy, did you give any gifts with a total value of more than \$	600 per person?	
No Yes. Fill in the details for each gift, Gifts with a total value of more than \$600	tcy, did you give any gifts with a total value of more than \$ Describe the gifts	Dates you gave	Value
No Yes. Fill in the details for each gift.		Dates you gave	Value
No Yes. Fill in the details for each gift, Gifts with a total value of more than \$600		Dates you gave	Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		Dates you gave	\(\forall \) \(
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		Dates you gave	\text{Value} \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code		Dates you gave	\text{Value} \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you		Dates you gave	\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts Describe the gifts	Dates you gave the gifts Dates you gave	\$
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No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts Describe the gifts	Dates you gave the gifts Dates you gave	\$\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts Describe the gifts	Dates you gave the gifts Dates you gave	\$\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts Describe the gifts	Dates you gave the gifts	\$\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts Describe the gifts	Dates you gave the gifts	\$\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts Describe the gifts	Dates you gave the gifts	\$\$

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-	Last Name			
thin 2 years heters were the total	min min dia			
thin 2 years before you filed for ba	nkruptcy, did you give any gifts or c	ontributions with a total va	ue of more than !	600 to any charit
Yes. Fill in the details for each gift of	or contribution.			
Gifts or contributions to charities	Parasita udada a a a a fatir fati			
that total more than \$600	Describe what you contributed		Date you contributed	Value : 125 1
Charity's Name	**************************************			\$
·				
				\$
Number Street	MATANA			
City State ZIP Code			:	
List Certain Losses				
No Yes. Fill in the details. Describe the property you lost and	Describe any insurance coverag	e for the loss	Date of your	Value of proper
Yes. Fill in the details.	Describe any insurance coverag Include the amount that insurance claims on line 33 of Schedule A/B:	has paid. List pending insurance	Date of your loss	Value of propert lost
Yes. Fill in the details. Describe the property you lost and	Include the amount that insurance	has paid. List pending insurance		
Yes. Fill in the details. Describe the property you lost and	Include the amount that insurance	has paid. List pending insurance		
Yes. Fill in the details. Describe the property you lost and	Include the amount that insurance	has paid. List pending insurance		
Yes. Fill in the details. Describe the property you lost and	Include the amount that insurance claims on line 33 of Schedule A/B:	has paid. List pending insurance		
Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or thin 1 year before you filed for bank a consulted about seeking bankruptude any attorneys, bankruptcy petitic	Include the amount that insurance claims on line 33 of Schedule A/B:	has paid. List pending insurance Property. ng on your behalf pay or tra	nsfer any proper	lost
Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or thin 1 year before you filed for bank to consulted about seeking bankrup	Include the amount that insurance claims on line 33 of <i>Schedule A/B</i> : Transfers kruptcy, did you or anyone else actirotcy or preparing a bankruptcy petiti	has paid. List pending insurance Property. ng on your behalf pay or tra	nsfer any proper	lost
Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or thin 1 year before you filed for bank up to consulted about seeking bankrup tude any attorneys, bankruptcy petitic No	Include the amount that insurance claims on line 33 of Schedule A/B: Fransfers kruptcy, did you or anyone else actirotcy or preparing a bankruptcy petition preparers, or credit counseling agen	has paid. List pending insurance Property. Ing on your behalf pay or training on your behalf pay or training on? Incides for services required in your behalf pay or training on your behalf pay or training or your behalf pay or your behalf p	nsfer any propert	\$y to anyone
Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or thin 1 year before you filed for bank up to consulted about seeking bankrup tude any attorneys, bankruptcy petitic No	Include the amount that insurance claims on line 33 of <i>Schedule A/B</i> : Transfers kruptcy, did you or anyone else actirotcy or preparing a bankruptcy petiti	has paid. List pending insurance Property. Ing on your behalf pay or training on your behalf pay or training on? Incides for services required in your behalf pay or training on your behalf pay or training or your behalf pay or your behalf p	nsfer any propert	lost
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Person Who Was Paid	Include the amount that insurance claims on line 33 of Schedule A/B: Fransfers kruptcy, did you or anyone else actirotcy or preparing a bankruptcy petition preparers, or credit counseling agen	has paid. List pending insurance Property. Ing on your behalf pay or training on your behalf pay or training on? Incides for services required in your behalf pay or training on your behalf pay or training or your behalf pay or your behalf p	nsfer any propertour bankruptcy. Date payment or transfer was	\$y to anyone
Person Who Was Paid	Include the amount that insurance claims on line 33 of Schedule A/B: Fransfers kruptcy, did you or anyone else actirotcy or preparing a bankruptcy petition preparers, or credit counseling agen	has paid. List pending insurance Property. Ing on your behalf pay or training on your behalf pay or training on? Incides for services required in your behalf pay or training on your behalf pay or training or your behalf pay or your behalf p	nsfer any propertour bankruptcy. Date payment or transfer was	\$y to anyone
Person Who Was Paid	Include the amount that insurance claims on line 33 of Schedule A/B: Fransfers kruptcy, did you or anyone else actirotcy or preparing a bankruptcy petition preparers, or credit counseling agen Description and value of any pro	has paid. List pending insurance Property. Ing on your behalf pay or training on your behalf pay or training on? Incides for services required in your behalf pay or training on your behalf pay or training or your behalf pay or your behalf p	nsfer any propertour bankruptcy. Date payment or transfer was	\$y to anyone
Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or hin 1 year before you filed for bank to consulted about seeking bankrup ude any attorneys, bankruptcy petitic No Yes. Fill in the details. Person Who Was Paid Number Street	Include the amount that insurance claims on line 33 of Schedule A/B: Fransfers kruptcy, did you or anyone else actirotcy or preparing a bankruptcy petition preparers, or credit counseling agen Description and value of any pro	has paid. List pending insurance Property. Ing on your behalf pay or training on your behalf pay or training on? Incides for services required in your behalf pay or training on your behalf pay or training or your behalf pay or y	nsfer any propertour bankruptcy. Date payment or transfer was	\$y to anyone

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, I	ps) twatte	
~~~		**************************************
	Description and value of any property transferred Date paymer transfer was	
Person Who Was Paid		œ.
Number Street		Ψ
		\$
City State ZIP Code	<b></b>	
Email or website address	<del>.</del>	
Person Who Made the Payment, if Not You		
No Yes. Fill in the details.		
	Description and value of any property transferred Date paymen transfer was	t or Amount of pay
Person Who Was Paid	made	¥.
Number Street		\$
		\$
City State ZIP Code	untry, did you sell trade or otherwise transfer any property to anyone otherwise	\$
City State ZIP Code  ithin 2 years before you filed for bankru ansferred in the ordinary course of your clude both outright transfers and transfers onot include gifts and transfers that you ha	made as security (such as the granting of a security interest or mortgage on yo	
City State ZIP Code ithin 2 years before you filed for bankru ansferred in the ordinary course of your	r business or financial affairs? made as security (such as the granting of a security interest or mortgage on you ave already listed on this statement.	our property).
City State ZIP Code  ithin 2 years before you filed for bankru ansferred in the ordinary course of your clude both outright transfers and transfers onot include gifts and transfers that you ha	r business or financial affairs?  made as security (such as the granting of a security interest or mortgage on you are already listed on this statement.  Description and value of property  Describe any property or payments re	our property).
City State ZIP Code  ithin 2 years before you filed for bankru ansferred in the ordinary course of your clude both outright transfers and transfers o not include gifts and transfers that you ha No Yes, Fill in the details.	r business or financial affairs?  made as security (such as the granting of a security interest or mortgage on you are already listed on this statement.  Description and value of property  Describe any property or payments re	our property).
City State ZIP Code  ithin 2 years before you filed for bankru ansferred in the ordinary course of your clude both outright transfers and transfers o not include gifts and transfers that you ha No Yes. Fill in the details.	r business or financial affairs?  made as security (such as the granting of a security interest or mortgage on you are already listed on this statement.  Description and value of property  Describe any property or payments re	our property).
City State ZIP Code  ithin 2 years before you filed for bankru ansferred in the ordinary course of your clude both outright transfers and transfers o not include gifts and transfers that you ha No I Yes. Fill in the details.  Person Who Received Transfer	r business or financial affairs?  made as security (such as the granting of a security interest or mortgage on you are already listed on this statement.  Description and value of property  Describe any property or payments re	ceived Date transf was made
City State ZIP Code  ithin 2 years before you filed for bankru ansferred in the ordinary course of your clude both outright transfers and transfers o not include gifts and transfers that you ha No I Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code	r business or financial affairs?  made as security (such as the granting of a security interest or mortgage on you ave already listed on this statement.  Description and value of property  transferred  Describe any property or payments recorded to the control of the control o	ceived Date transi was made
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City State ZIP Code  ithin 2 years before you filed for bankru ansferred in the ordinary course of your clude both outright transfers and transfers onot include gifts and transfers that you ha l No l Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you  Person Who Received Transfer	r business or financial affairs?  made as security (such as the granting of a security interest or mortgage on you ave already listed on this statement.  Description and value of property  transferred  Describe any property or payments recorded to the control of the control o	ceived Date transi was made

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Debtor 1 First Name	Middle Name Last N	Jones	Case number (# know	n)	
19. Within 10 years befor are a beneficiary? (The No	nese are often called as	ptcy, did you transfer any proper sset-protection devices.)	ty to a self-settled trust	or similar device of v	which you
		Description and value of the prope	rty transferred		Date transfer was made
Name of trust					And the second second second second
Part 8: List Certain I	Financial Accounts		Boxes, and Storage		
closed, sold, moved, Include checking, sav	or transferred? rings, money market, o insion funds, coopera	cy, were any financial accounts o or other financial accounts; certi tives, associations, and other fin	ficates of deposit; share	_	
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance before closing or transfer
Name of Financial Inst	HELL DR SH	e 2000 - 06 1 CO	Checking Savings	id 2016	<u>\$407.00</u>
Richard	Staty ZIP Code	81	■ Money market ■ Brokerage ■ Other		
Name of Financial Inst	lution	xxxx	Checking	-	\$
Number Street			Savings  Money market		
			☐ Brokerage		
City	State ZIP Code		Other		
-	lid you have within 1 y her valuables?	year before you filed for bankrup	tcy, any safe deposit bo	x or other depository	rfor
		Who else had access to it?	Describe the o	contents	Do you still have it?
Name of Financial Insti	tution	Name	· 		☐ No ☐ Yes
Number Street	·	Number Street			
City	State ZIP Code	City State ZIP Code	· · · · · · · · · · · · · · · · · · ·		

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ebtor 1 First Name Middle Name Las	LOPS.	Case number (if known)	
2. Have you stored property in a storage unit  No  Yes. Fill in the details.	or place other than your home within	n 1 year before you filed for bankruptcy?	
	Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name		☐ No ☐ Yes
Number Street	Number Street		
	CityState ZIP Code		
City State ZIP Code  Part 9: Identify Property You Hold	or Control for Someone Else		
23. Do you hold or control any property that s or hold in trust for someone.	comeone else owns? Include any pro	perty you borrowed from, are storing for,	
Yes. Fill in the details.	Where is the property?	Describe the property	Value
Owner's Name			\$
Number Street	Number Street		
City State ZIP Code	City State ZIP Co	de .	499
art 10: Give Details About Environm	nental Information	· · · · · · · · · · · · · · · · · · ·	I
or the purpose of Part 10, the following defin	nitions apply:		
Environmental law means any federal, stat hazardous or toxic substances, wastes, or including statutes or regulations controlling Site means any location, facility, or proper	te, or local statute or regulation conc r material into the air, land, soil, surfa ng the cleanup of these substances, w ty as defined under any environment	vastes, or material.	
utilize it or used to own, operate, or utilize  Hazardous material means anything an en- substance, hazardous material, pollutant,	vironmental law defines as a hazardo	ous waste, hazardous substance, toxic	
eport all notices, releases, and proceedings		vhen they occurred.	
. Has any governmental unit notified you tha	nt you may be liable or potentially liab	le under or in violation of an environmental l	aw?
No Q Yes. Fill in the details.			
	Governmental unit	nvironmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		

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Vey ou notified any governmental unit of any release of hazardous material?    Covernmental unit				
Yes. Fill in the details.  Governmental unit  Filme of site  Governmental unit  Number Street  City State ZIP Code  Court or agency Nature of the case  Case title  Court Street	ve you notified any governmenta	I unit of any release of hazardous mater	ial?	
Yes. Fill in the details.    Governmental unit		•		
Name of site   Governmental unit   Environmental law, if you know it   Date of notice				
Name of site    Number Street	res. I in the details.	Governmental unit	Environmental law if you know h	
Number Street   Number Street   State ZIP Code		Oovernmentar unit	Environmental law, if you know it	Date of notice
Number Street   Number Street   State ZIP Code				
City State ZIP Code  Very you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No  Yes. Fill in the details.  Court or agency Nature of the case Status of the case  Case title  Court Name   Pending   On appeal On ap	Name of site	Governmental unit	-	<u> </u>
City State ZIP Code  Very you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No  Yes. Fill in the details.  Court or agency Nature of the case  Case title  Court Name  City State ZIP Code  City State ZIP Code  Case number  Case number  Case number  Case number  Case number  Case it ide  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number. Do not include Social Security number or ITIN.  Elix:  City State ZiP Code  Describe the nature of the business  Employer Identification number. Do not include Social Security number or ITIN.  Elix:  City State ZiP Code  Describe the nature of the business  Employer Identification number. Do not include Social Security number or ITIN.  Elix:  City State ZiP Code  Dates business existed  Employer Identification number Do not include Social Security number or ITIN.  Elix:  City State ZiP Code  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  Business Name  Name of accountant or bookkeeper Do not include Sacial Security number or ITIN.	N		_	
re you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No  Yes. Fill in the details.  Court or agency Nature of the case Status of the case Case itile  Court Name  Number Street  Court Name  Court Name  Court Name  Court Name  Number Street  Court Name  Number Street  Name of accountant or bookkeeper	senunci onéet	Number Street		
re you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No  Yes. Fill in the details.  Court or agency Nature of the case Status of the case Case itile  Court Name  Number Street  Court Name  Court Name  Court Name  Court Name  Number Street  Court Name  Number Street  Name of accountant or bookkeeper	44444444		_	
Veyou been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.    No		City State ZIP Code		
No Yes. Fill in the details.  Court or agency  Nature of the case  Case title  Court Name  Court Name  Court Name  Court Name  Number Street  City  State ZiP Code  State ZiP Code  Gity  State ZiP Code  State ZiP Code  Gity  State ZiP Code  State ZiP Code  State ZiP Code  State ZiP Code  A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.	City State ZIP (	Code		
No Yes. Fill in the details.  Court or agency  Nature of the case  Case title  Court Name  Court Name  Court Name  Court Name  Number Street  City  State ZiP Code  State ZiP Code  Gity  State ZiP Code  State ZiP Code  Gity  State ZiP Code  State ZiP Code  State ZiP Code  State ZiP Code  A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.				
Yes. Fill in the details.    Court or agency   Nature of the case   Status of the case   Case title	/e you been a party in any judicia	if or administrative proceeding under an	y environmental law? Include s	ettlements and orders.
Case title	No			
Case title	Yes. Fill in the details.			
Case title		Court or agency	Nature of the case	Status of the
Case number  City State ZIP Code  11 Give Details About Your Business or Connections to Any Business  Inin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  Business Name  Number Street  Name of accountant or bookkeeper  Dates business existed				case
On apper	Case title			n
Case number   City   State   ZIP Code      City   State   ZIP Code		Court Name	***************************************	•
Case number  City State ZIP Code    Give Details About Your Business or Connections to Any Business				Un appea
Give Details About Your Business or Connections to Any Business    A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   A member of a limited liability company (LLC) or limited liability partnership (LLP)   A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business.   Describe the nature of the business   Employer Identification number     Do not include Social Security number or ITIN.     EIN:     Duisiness Name   Describe the nature of the business   Employer Identification number     Do not include Social Security number or ITIN.     Business Name   Describe the nature of the business   Employer Identification number     Do not include Social Security number or ITIN.     Business Name   Do not include Social Security number or ITIN.     Business Name   Do not include Social Security number or ITIN.     Business Name   Do not include Social Security number or ITIN.     Business Name   Do not include Social Security number or ITIN.     Business Name   Do not include Social Security number or ITIN.		Number Street	<del></del>	Conclude
Give Details About Your Business or Connections to Any Business    A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   A member of a limited liability company (LLC) or limited liability partnership (LLP)   A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business.   Describe the nature of the business   Employer Identification number     Do not include Social Security number or ITIN.     EIN:     Duisiness Name   Describe the nature of the business   Employer Identification number     Do not include Social Security number or ITIN.     Business Name   Describe the nature of the business   Employer Identification number     Do not include Social Security number or ITIN.     Business Name   Do not include Social Security number or ITIN.     Business Name   Do not include Social Security number or ITIN.     Business Name   Do not include Social Security number or ITIN.     Business Name   Do not include Social Security number or ITIN.     Business Name   Do not include Social Security number or ITIN.			•	
hin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  No. None of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  EIN:  Number Street  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  Business Name  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  Business Name  Do not include Social Security number or ITIN.  Business Name  Do not include Social Security number or ITIN.  Business Name  Do not include Social Security number or ITIN.	Case number	City State ZIP Cor	de	
Business Name    Do not include Social Security number or ITIN.	hin 4 years before you filed for b	ankruptcy, did you own a business or h	ave any of the following connec	tions to any business?
Number Street    Name of accountant or bookkeeper   Dates business existed	thin 4 years before you filed for beautiful A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or managed An owner of at least 5% of the No. None of the above applies. G	ankruptcy, did you own a business or had business of a company (LLC) or limited liability participation business of a corporation business of a co	ave any of the following connec ctivity, either full-time or part-tim nership (LLP) ation	tions to any business? e
Number Street  Name of accountant or bookkeeper  Dates business existed  From	hin 4 years before you filed for be A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. G	ankruptcy, did you own a business or haloyed in a trade, profession, or other ac y company (LLC) or limited liability parti- ging executive of a corporation e voting or equity securities of a corporation to to Part 12.	ave any of the following connectivity, either full-time or part-time nership (LLP) ation	e
Number Street    Name of accountant or bookkeeper   Dates business existed	hin 4 years before you filed for be A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. G	ankruptcy, did you own a business or haloyed in a trade, profession, or other ac y company (LLC) or limited liability parti- ging executive of a corporation e voting or equity securities of a corporation to to Part 12.	ave any of the following connectivity, either full-time or part-time nership (LLP) ation iness. Employer Ider	e ntification number
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City State ZIP Code  Describe the nature of the business Employer Identification number  Do not include Social Security number or ITIN.  EIN:	hin 4 years before you filed for be A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. G	ankruptcy, did you own a business or haloyed in a trade, profession, or other acty company (LLC) or limited liability partinging executive of a corporation e voting or equity securities of a corporation to Part 12.  and fill in the details below for each busines	ave any of the following connectivity, either full-time or part-timenership (LLP)  ation iness. Employer Ider Do not include	e ntification number e Social Security number or ITIN.
City State ZIP Code  Describe the nature of the business Employer Identification number  Do not include Social Security number or ITIN.  EIN:	hin 4 years before you filed for be A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. G	ankruptcy, did you own a business or haloyed in a trade, profession, or other acty company (LLC) or limited liability partinging executive of a corporation e voting or equity securities of a corporation to Part 12.  and fill in the details below for each busines	ave any of the following connectivity, either full-time or part-timenership (LLP)  ation iness. Employer Ider Do not include	e ntification number e Social Security number or ITIN.
Business Name  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  EIN:	hin 4 years before you filed for be A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. G	ankruptcy, did you own a business or haloyed in a trade, profession, or other acty company (LLC) or limited liability partinging executive of a corporation e voting or equity securities of a corporation to Part 12.  and fill in the details below for each busines	ave any of the following connectivity, either full-time or part-timenership (LLP)  ation  iness.  Employer Ider Do not include EIN:  Dates busines	e ntification number e Social Security number or ITIN.
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Number Street  Name of accountant or bookkeeper  Dates business existed	hin 4 years before you filed for beautiful A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. Ges. Check all that apply above a Business Name	ankruptcy, did you own a business or haloyed in a trade, profession, or other acty company (LLC) or limited liability partinging executive of a corporation e voting or equity securities of a corporation to to Part 12.  and fill in the details below for each busines Describe the nature of the busines	ave any of the following connectivity, either full-time or part-timenership (LLP)  ation  iness.  Employer ider  Do not include  EIN:  The Dates busines	etification number Social Security number or ITIN. Security number or ITIN. Security number or ITIN.
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	thin 4 years before you filed for beautiful A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. Generally above a Business Name  Number Street  City State ZIP C	ankruptcy, did you own a business or haloyed in a trade, profession, or other acty company (LLC) or limited liability partinging executive of a corporation e voting or equity securities of a corporation to to Part 12.  and fill in the details below for each busines Describe the nature of the busines	ave any of the following connectivity, either full-time or part-timenership (LLP)  ation  iness.  Employer iden  Do not include  From  Employer iden  Do not include	etification number Social Security number or ITIN. Security number or ITIN. To tification number Social Security number or ITIN.
	hin 4 years before you filed for beautiful A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. Garage Check all that apply above a Business Name  Number Street  City State ZIP C	ankruptcy, did you own a business or haloyed in a trade, profession, or other act y company (LLC) or limited liability participation of a corporation e voting or equity securities of a corporation to Part 12.  and fill in the details below for each busines Describe the nature of the busines  Name of accountant or bookkeeper ode	ave any of the following connectivity, either full-time or part-timenership (LLP)  ation  iness.  Employer Iden Do not include EIN:  From  Employer Iden Do not include Ein:	etification number Social Security number or ITIN. Security number To tification number Social Security number or ITIN.

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	Name	(if known)
	Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN
Business Name	•	EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code		From To
		:
titutions, creditors, or other parties. No Yes. Fill in the details below.	otcy, did you give a financial statement to anyone a	_
Name	MM / DD / YYYY	
Number Street		
City State ZIP Code		
2: Sign Below		
have read the answers on this Statementswers are true and correct. I understant connection with a bankruptcy case care U.S.C. §§ 152, 1341, 1519, and 3571.	nt of Financial Affairs and any attachments, and I de did that making a false statement, concealing proper in result in fines up to \$250,000, or imprisonment for	ty, or obtaining money or property by frau
nave read the answers on this Statementswers are true and correct. I understant connection with a bankruptcy case care U.S.C. §§ 152, 1341, 1519, and 3571.	d that making a false statement, concealing proper	ty, or obtaining money or property by frau
nave read the answers on this Statemen iswers are true and correct. I understan connection with a bankruptcy case care U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1	id that making a false statement, concealing proper in result in fines up to \$250,000, or imprisonment for	ty, or obtaining money or property by fraudup to 20 years, or both.
nave read the answers on this Statemen iswers are true and correct. I understan connection with a bankruptcy case care U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1	of that making a false statement, concealing proper in result in fines up to \$250,000, or imprisonment for signature of Debtor 2	ty, or obtaining money or property by frauc up to 20 years, or both.
have read the answers on this Statementswers are true and correct. I understant connection with a bankruptcy case care U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date Office of Debtor 1  Date Office of Debtor 1  No Yes	of that making a false statement, concealing proper in result in fines up to \$250,000, or imprisonment for signature of Debtor 2	ty, or obtaining money or property by frauc up to 20 years, or both.  For Bankruptcy (Official Form 107)?

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Debtor 1	Tiff	ใกน	chae	2,5
200.07	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Lasi Name	
United States B	ankruptcy Court	for the: MAHAA	District of	
Case number				

Check if this is an amended filing

12/15

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

Creditor's name:  Description of property securing debt:  Creditor's name:  Creditor's name:  Creditor's name:  Description of property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:  Creditor's name:  Description of property  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:  Creditor's name:  Creditor's name:  Creditor's name:  Description of property  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and redeem it.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and redeem it.	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Description of property and redeem it.		☐ Surrender the property.	O No
property securing debt:    Retain the property and enter into a Reaffirmation Agreement.   Retain the property and [explain]:   No		Retain the property and redeem it.	☐ Yes
Creditor's name:  Description of property securing debt:  Creditor's name:  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and lexplain]:  Creditor's name:  Retain the property and lexplain]:  Creditor's name:  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.	property	Retain the property and enter into a Reaffirmation Agreement.	
name:  Description of property securing debt:  Creditor's name:  Description of property and feedem it.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and feedem it.  Retain the property and redeem it.			<del>-</del>
Description of property securing debt:    Retain the property and enter into a Reaffirmation Agreement.   Retain the property and [explain]:   No name:   Surrender the property and redeem it.   Yes   Yes   Property   No name:   Retain the property and redeem it.   Yes   Yes   Property   Retain the property and redeem it.   Yes   Property   Retain the property and enter into a Reaffirmation Agreement.   Retain the property and [explain]:   Property   Retain the property   Retain t		☐ Surrender the property.	□ No
properly securing debt:  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:  Retain the property and [explain]:  Creditor's name:  Description of property securing debt:  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:  Creditor's name:  Description of property  Retain the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.		Retain the property and redeem it.	☐ Yes
Creditor's name:  Description of property securing debt:  Retain the property and [explain]:  Retain the property Securing debt:  Retain the property Securing debt:  Retain the property and redeem it.  Yes  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.	property		
Creditor's name:  Description of property securing debt:  Creditor's name:  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:  Retain the property and redeem it.  Retain the property and redeem it.  Retain the property.  Retain the property.  Retain the property and redeem it.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.	. •		
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property securing debt:  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:  Creditor's Security Surrender the property.  Retain the property and redeem it.  Retain the property and redeem it.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.	•	Retain the property and redeem it.	☐ Yes
Creditor's Surrender the property. No	property		
name:  Description of property securing debt:  Retain the property and enter into a Reaffirmation Agreement.	•	Retain the property and [explain]:	
Description of property and enter into a Reaffirmation Agreement.  Retain the property and enter into a Reaffirmation Agreement.		☐ Surrender the property.	□ No
property Securing debt: Retain the property and enter into a Reaffirmation Agreement.	,	Retain the property and redeem it.	☐ Yes
	property		
	·	Retain the property and [explain]:	

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Debtor 1 TIFFCON Last Name Last Name

Case number (#known)

#### List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Carago a Achaid	Will the lease be assumed?	1.
.essor's name:		□ No	
Description of leased property:		☐ Yes	
essor's name:		□ No	
Description of leased roperty:		Yes	
essor's name:		□ No	
escription of leased roperty:		☐ Yes	
essor's name:		□ No	***************************************
rescription of leased roperty:		☐ Yes	
essor's name:		□No	
escription of leased operty:		Yes	
essor's name:	біні в нероговичник на повін в завовник за постора в на домовін на повін на повін на повін на повін на повін н	□ No	والمراجعة والمساملة
escription of leased operty:		Yes	
essor's name:		□ No	·~~~~~
escription of leased roperty:		☐ Yes	
3: Sign Below			liter erree een
	cated my intention about any	r property of my estate that secures a debt and any	
sonal property that is subject to an unexpired	lease.		
gnature of Debtor 1	Signature of Debtor 2		
ate 06/14/70/7	Date		